

PART B - FEE(S) TRANSMITTAL



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324 7590 09/10/2008

JoAnn Villamizar
Ciba Corporation/Patent Department
540 White Plains Road
P.O. Box 2005
Tarrytown, NY 10591

10/16/2008 ADDRESS 00000047 031935 10552952

01 FC:1501 1510.00 DA

02 APPLICATION NO. 300.00 DA FILING DATE

03 EP:0001 10 00 00

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Andrea DeCeccis

(Depositor's name)

Andrea DeCeccis

(Signature)

October 14, 2008

(Date)

01/552,952	10/13/2005	Reinhard H Sommerladc	II/2-22879/A/PCT	6876
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TITLE OF INVENTION: NOVEL TRIFUNCTIONAL PHOTONITIATORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	12/10/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS				
TREIDL, JESSICA I		1796	522-060000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Shieila A. Loggins

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. Reel: 018289 Frame: 0048 Rec. 9/11/08

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ciba Specialty Chemicals Corporation Tarrytown, N.Y.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

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Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1935 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Shieila A. Loggins

Date

10/14/08

Typed or printed name

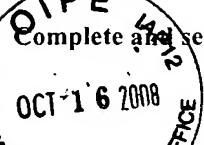
Shieila A. Loggins

Registration No. 56,221

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Andrea DeCeccis	(Depositor's name)
<i>Andrea DeCeccis</i>	
(Signature)	
October 14, 2008	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/552,952	10/13/2005	Reinhard H Sommerlade	II-2-22879/A/PCT	6876

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nonprovisional	NO	\$1440 <i>\$1,510</i>	\$300	\$0	\$1740	12/10/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
TREIDL, JESSICA I	1796	522-060000

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Authorized Signature

Shiela A. Loggins

Date

10/14/08

Typed or printed name

Shiela A. Loggins

Registration No.

56,221

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